## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if several names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	Thick	Coated Comb	oustor Liner					
		ich is attached here						
		as Application a mended on [date] (i		101	PCT Inter	national A	pplication	
I hereby state th claims, as amen	at I have reviewed ded by any amen	d and understand the dment referred to a	ne contents of the above.	above-ident	ified speci	fication, in	cluding the	
I acknowledge the accordance with	ne duty to disclose 37 CFR §1.56.	e information which	is material to the e	examination	of this ap	plication in		
patent or invent designated at le below, by check	or's or plant bree east one country of ing the box, any f	efits under 35 U.S.0 der's rights certific other than the Unit oreign application f having a filing date	ate(s), or 365(a) or ed States of Amer or patent, inventor	of any PCT rica, listed l r's or plant l	internatio pelow, and preeder's r	nal applical have also ights certif	ation which o identified ficate(s), or	
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY NOT CLAIMED		CERTIFII COPY ATTACH			
					□ Yes	□ No		
					□ Yes			
			<u> </u>		□ Yes	□ No		
International approf each of the oprovided by the defined in 37 CF	olication designati claims of this ap <sub>l</sub> first paragraph o	r 35 U.S.C. §120 ng the United State blication is not discord 35 U.S.C. §112, ccurred between the lication:	es of America, liste closed in the prior I acknowledge th	ed below an United State e duty to d	d, insofar ates appli isclose m	as the sub cation in that aterial info	ject matter he manner rmation as	
U.S. PARENT APPLICATION OR PCT PARENT NUMBER		PARENT FILING DATE (day, month, year)		STATUS (patent and number, pending, abandoned)				
I hereby claim th	ne benefit under 3	5 U.S.C. §119(e) of	any United States	s provisiona	I application	on(s) listed	below.	
APPLICATION NUMBER(S)			ING DATE (day, month, year)					

As a named inventor, I hereby appoint Practitioners at Customer Number 298 (Reg. No. 26,315), Henry J. Policinski, (Reg. No. 26, 621) and Scott R. Hayden, (each of them severally, my/our attorney(s) or agents(s), with full power of substitution to prosecute this application, to make alterations and amendments therein, to receiful all business in the Patent and Trademark Office connected therewith.	Reg. No. 41,821) jointly, and on, delegation and revocation,
all business in the Patent and Trademark Office connected therewith.	

I hereby direct that all correspondence and telephone calls in connection with this application be addressed to Practitioners at Customer Number \_\_\_\_29827

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, statements were made with the knowledge that willfully false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that all such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Marie Ann McMasters

Full name of sole or fir	rst joint inventor:	Marie Ann Mcl		/ /	
Inventor's signature: _	Marie ann	Mc Masters	Date:	8/5/03	
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Citizenship: US					
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Full name of second jo	oint inventor:				
Inventor's signature: _			Date:	***	
Residence:					
Citizenship: US					
Post Office Address:					
Full name of third join	nt inventor:				
•			Date:		
Residence:					
Citizenship: US					
Post Office Address:					
Full name of fourth jo	int inventor:				
Inventor's signature:			Date:		
Residence:					
Citizenship: US					
Post Office Address:					